

<i>SERFF Tracking Number:</i>	<i>GRAX-G127009881</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Annuity Investors Life Insurance Company</i>	<i>State Tracking Number:</i>	<i>47837</i>
<i>Company Tracking Number:</i>	<i>P1426011NW</i>		
<i>TOI:</i>	<i>A07I Individual Annuities - Special</i>	<i>Sub-TOI:</i>	<i>A07I.001 Equity Indexed</i>
<i>Product Name:</i>	<i>Annuity Individual Fixed</i>		
<i>Project Name/Number:</i>	<i>Annuity Individual Fixed/P1426011NW</i>		

Filing at a Glance

Company: Annuity Investors Life Insurance Company

Product Name: Annuity Individual Fixed

SERFF Tr Num: GRAX-G127009881

State: Arkansas

TOI: A07I Individual Annuities - Special

SERFF Status: Closed-Approved-Closed

State Tr Num: 47837

Sub-TOI: A07I.001 Equity Indexed

Co Tr Num: P1426011NW

State Status: Approved-Closed

Filing Type: Form

Author: SPI
GreatAmericanFinancialRes
Date Submitted: 01/30/2011

Reviewer(s): Linda Bird
Disposition Date: 02/02/2011

Disposition Status: Approved-Closed

Implementation Date Requested:

Implementation Date:

State Filing Description:

General Information

Project Name: Annuity Individual Fixed

Project Number: P1426011NW

Requested Filing Mode: Review & Approval

Explanation for Combination/Other:

Submission Type: New Submission

Filing Status Changed: 02/02/2011

State Status Changed: 02/02/2011

Created By: SPI GreatAmericanFinancialRes

Corresponding Filing Tracking Number:

Filing Description:

Status of Filing in Domicile: Authorized

Date Approved in Domicile: 01/24/2011

Domicile Status Comments:

Market Type:

Overall Rate Impact:

Deemer Date:

Submitted By: SPI GreatAmericanFinancialRes

Enclosed for your review and approval, please find the form referenced above. This insert page will revise the specification pages for contract form numbers P1426009NW, which was approved for use in your state on 02/27/09 under filing number 41645. This insert page has not been previously submitted to your Department for preliminary review. This submission does not contain any provisions, conditions, or concepts that are uncommon, unusual or possibly controversial from the standpoint of normal company or industry standards.

The following changes have been made to the specification page of the annuity contract referenced above.

SERFF Tracking Number: GRAX-G127009881 State: Arkansas
Filing Company: Annuity Investors Life Insurance Company State Tracking Number: 47837
Company Tracking Number: P1426011NW
TOI: A071 Individual Annuities - Special Sub-TOI: A071.001 Equity Indexed
Product Name: Annuity Individual Fixed
Project Name/Number: Annuity Individual Fixed/P1426011NW

1. Expanded the number of indexed strategies on page 3.
2. Removed the S&P disclosure and company contact information from page 3.
3. Changed the form number on page 3 to P1426011NW.
4. Added page 3-1 with the new S&P disclosure and the company contact information.

Company and Contact

Filing Contact Information

Juli Fleming, Compliance Filing Specialist jffleming@gafri.com
P. O. Box 5420 513-412-0018 [Phone] 10018 [Ext]
Cincinnati, OH 45201-5420 513-361-5967 [FAX]

Filing Company Information

Annuity Investors Life Insurance Company CoCode: 93661 State of Domicile: Ohio
P.O. Box 5423 Group Code: 84 Company Type:
Cincinnati, OH 45201-5423 Group Name: Great American State ID Number:
Financial Resources, Inc.
(800) 854-3649 ext. [Phone] FEIN Number: 31-1021738

Filing Fees

Fee Required? Yes
Fee Amount: \$50.00
Retaliatory? No
Fee Explanation:
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Annuity Investors Life Insurance Company	\$50.00	01/30/2011	44187903

<i>SERFF Tracking Number:</i>	<i>GRAX-G127009881</i>	<i>State:</i>	<i>Arkansas</i>
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<i>TOI:</i>	<i>A071 Individual Annuities - Special</i>	<i>Sub-TOI:</i>	<i>A071.001 Equity Indexed</i>
<i>Product Name:</i>	<i>Annuity Individual Fixed</i>		
<i>Project Name/Number:</i>	<i>Annuity Individual Fixed/P1426011NW</i>		

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Linda Bird	02/02/2011	02/02/2011

<i>SERFF Tracking Number:</i>	<i>GRAX-G127009881</i>	<i>State:</i>	<i>Arkansas</i>
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<i>TOI:</i>	<i>A071 Individual Annuities - Special</i>	<i>Sub-TOI:</i>	<i>A071.001 Equity Indexed</i>
<i>Product Name:</i>	<i>Annuity Individual Fixed</i>		
<i>Project Name/Number:</i>	<i>Annuity Individual Fixed/P1426011NW</i>		

Disposition

Disposition Date: 02/02/2011

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

<i>SERFF Tracking Number:</i>	<i>GRAX-G127009881</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Annuity Investors Life Insurance Company</i>	<i>State Tracking Number:</i>	<i>47837</i>
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<i>Product Name:</i>	<i>Annuity Individual Fixed</i>		
<i>Project Name/Number:</i>	<i>Annuity Individual Fixed/P1426011NW</i>		

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		No
Supporting Document	Application		No
Supporting Document	Life & Annuity - Acturial Memo		No
Supporting Document	AR - NAIC TRANSMITTAL DOCUMENT, AR - NAIC FORM FILING ATTACHMENT		Yes
Supporting Document	Cover Letter		Yes
Form	Individual Deferred Annuity Contract - Insert Pages		Yes

SERFF Tracking Number:	GRAX-G127009881	State:	Arkansas
Filing Company:	Annuity Investors Life Insurance Company	State Tracking Number:	47837
Company Tracking Number:	P1426011NW		
TOI:	A071 Individual Annuities - Special	Sub-TOI:	A071.001 Equity Indexed
Product Name:	Annuity Individual Fixed		
Project Name/Number:	Annuity Individual Fixed/P1426011NW		

Form Schedule

Lead Form Number: P1426011NW

Schedule Item Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
	P1426011NW	Certificate	Individual Deferred Annuity Contract - t, Insert Page, Endorsement or Rider	Initial		0.000	P1426011NW .PDF

CONTRACT SPECIFICATIONS

OWNER: [JOHN DOE]

AGE OF OWNER AS OF CONTRACT EFFECTIVE DATE: [35]

[JOINT OWNER:] [N/A]

[AGE OF JOINT OWNER AS OF CONTRACT EFFECTIVE DATE:] [N/A]

ANNUITANT: [JOHN DOE]

CONTRACT NUMBER: [000000000]

TAX-QUALIFIED CONTRACT: [YES-QUALIFICATION ENDORSEMENT INCLUDED][NO]

CONTRACT EFFECTIVE DATE: [FEBRUARY 01, 2009]

ANNUITY COMMENCEMENT DATE: [FEBRUARY 1, 2069]

INTEREST STRATEGY APPLICATION DATE: [The 6th and the 20th day of each month]

ACCOUNT VALUE PAYMENT PERIOD: [7 years]

MINIMUM REQUIRED VALUE: [\$1,000]

MINIMUM PURCHASE PAYMENT: [\$50.00 for flexible Purchase Payments and \$3,000 for single sums]

MAXIMUM PURCHASE PAYMENT: [\$750,000]

EARLY WITHDRAWAL CHARGE SCHEDULE:

Contract Year	1	2	3	4	5	6	7	8	9	10	11+
Early Withdrawal Charge*	10%	9%	8%	7%	6%	5%	4%	3%	2%	1%	0%

*The Early Withdrawal Charge will decrease by 1/12th of one percent (1%) each month during a Contract Year

GMSV Factor: [90%]

GMSV Rate: [2.00%]

GUARANTEED MINIMUM DECLARED RATE: [2.00%]

PURCHASE PAYMENT BONUS (FOR BONUS PERIOD ONLY): [2%]

BONUS PERIOD: [Contract Years 1 through 5]

INITIAL INTEREST STRATEGY(IES):	Initial Selection	Guaranteed Values
[Declared Rate Strategy]	[20%]	
[Term:]		[1 Year]
[One Year Annual Point-to-Point Indexed Strategy]	[20%]	
[Term:]		[1 Year]
[Segment:]		[1 Year]
[Valuation Dates:]		[End of Segment]
[Minimum Participation Rate:]		[75%]
[Minimum Cap:]		[3%]
[Minimum Floor:]		[0%]
[Maximum Index Spread:]		[10%]
[[Annual Point-to-Point Indexed Strategy]	[20%]	
Term:		1 Year
Segment:		[1 Year]
Valuation Dates:		[End of Segment]
Minimum Participation Rate:		[100%]
Minimum Cap:		[3%]
Minimum Floor:		[1%]
Maximum Index Spread:		[0%]]
[[Annual Point-to-Point Indexed Strategy]	[20%]	
Term:		1 Year
Segment:		[1 Year]
Valuation Dates:		[End of Segment]
Minimum Participation Rate:		[100%]
Minimum Cap:		[3%]
Minimum Floor:		[2%]
Maximum Index Spread:		[0%]]
[Annual Point-to-Point Indexed Strategy]	[20%]	
Term:		1 Year
Segment:		[1 Year]
Valuation Dates:		[End of Segment]
Minimum Participation Rate:		[100%]
Minimum Cap:		[3%]
Minimum Floor:		[3%]
Maximum Index Spread:		[0%]]

The Index used for Indexed Strategies available under this Contract is the Standard & Poor's 500® Index. It excludes any dividends that may be paid by the firms that comprise the Index.

[The [FlexMax Plus] is not sponsored, endorsed, sold or promoted by Standard & Poor's ("S&P") or its third party licensors. Neither S&P nor its third party licensors makes any representation or warranty, express or implied, to the owners of the [FlexMax Plus] or any member of the public regarding the advisability of investing in securities generally or in the [FlexMax Plus] particularly or the ability of the S&P 500® index (the "Index") to track general stock market performance. S&P's and its third party licensor's only relationship to Annuity Investors Life Insurance Company is the licensing of certain trademarks and trade names of S&P and the third party licensors and of the Index which is determined, composed and calculated by S&P or its third party licensors without regard to Annuity Investors Life Insurance Company or [Annuity Investors]. S&P and its third party licensors have no obligation to take the needs of Annuity Investors Life Insurance Company or the owners of the [FlexMax Plus] into consideration in determining, composing or calculating the Index. Neither S&P nor its third party licensors is responsible for and has not participated in the determination of the prices and amount of the [FlexMax Plus] or the timing of the issuance or sale of the [FlexMax Plus] or in the determination or calculation of the equation by which the [FlexMax Plus] is to be converted into cash. S&P has no obligation or liability in connection with the administration, marketing or trading of the [FlexMax Plus].

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INQUIRIES: For information and assistance, or to make a complaint, call or write:

Policyowner Service Department
Annuity Investors Life Insurance Company
P.O. Box 5420
Cincinnati, Ohio 45201-5420
1-800-854-3649

If you prefer, you may visit us at our website, www.GAFRI.com

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<i>Project Name/Number:</i>	<i>Annuity Individual Fixed/P1426011NW</i>		

Supporting Document Schedules


	Item Status:	Status
		Date:
Satisfied - Item:	AR - NAIC TRANSMITTAL DOCUMENT, AR - NAIC FORM FILING ATTACHMENT	
Comments:		
Attachments:		
	AR - NAIC TRANSMITTAL DOCUMENT.PDF	
	AR - NAIC FORM FILING ATTACHMENT.PDF	

	Item Status:	Status
		Date:
Satisfied - Item:	Cover Letter	
Comments:		
Attachment:		
	Cover Letter.PDF	

Life, Accident & Health, Annuity, Credit Transmittal Document

1.	Prepared for the State of	Arkansas					
2.	Department Use Only						
	State Tracking ID						
3.	Insurer Name & Address	Domicile	Insurer License Type	NAIC Group #	NAIC #	FEIN #	State #
	Annuity Investors Life Insurance Company P.O. Box 5423 Cincinnati OH 45201-5423	OH		084	93661	31-1021738	
4.	Contact Name & Address	Telephone #	Fax #	E-mail Address			
	Juli K. Fleming P. O. Box 5420 Cincinnati OH 45201-5420	800-854-3649 Ext. 10018	513-361-5967	jffleming@gafri.com			
5.	Requested Filing Mode	<input checked="" type="checkbox"/> Review & Approval <input type="checkbox"/> File & Use <input type="checkbox"/> Informational <input type="checkbox"/> Combination (please explain): _____ <input type="checkbox"/> Other (please explain): _____					
6.	Company Tracking Number	P1426011NW					
7.	<input checked="" type="checkbox"/> New Submission <input type="checkbox"/> Resubmission	Previous file # _____					
8.	Market	<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Franchise <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Small <input type="checkbox"/> Large <input type="checkbox"/> Small and Large <input type="checkbox"/> Employer <input type="checkbox"/> Association <input type="checkbox"/> Blanket <input type="checkbox"/> Discretionary <input type="checkbox"/> Trust <input type="checkbox"/> Other: _____ </div> <div>Group</div> </div>					
9.	Type of Insurance	A07I Individual Annuities - Special					
10.	Product Coding Matrix Filing Code	A07I.001 Equity Indexed					
11.	Submitted Documents	<input type="checkbox"/> <u>FORMS</u> <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Policy <input type="checkbox"/> Application/Enrollment <input type="checkbox"/> Schedule of Benefits </div> <div> <input type="checkbox"/> Outline of Coverage <input type="checkbox"/> Rider/Endorsement <input checked="" type="checkbox"/> Other: <u>Insert Pages</u> </div> <div> <input type="checkbox"/> Certificate <input type="checkbox"/> Advertising </div> </div> <input type="checkbox"/> <u>RATES</u> <input type="checkbox"/> New Rate <input type="checkbox"/> Revised Rate <input type="checkbox"/> <u>FILING OTHER THAN FORM OR RATE:</u> Please explain: _____ <u>SUPPORTING DOCUMENTATION</u> <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Articles of Incorporation <input type="checkbox"/> Association Bylaws <input type="checkbox"/> Statement of Variability <input type="checkbox"/> Actuarial Memorandum <input type="checkbox"/> Other: _____ </div> <div> <input type="checkbox"/> Third Party Authorization <input type="checkbox"/> Trust Agreement <input type="checkbox"/> Certifications </div> </div>					

12.	Filing Submission Date	01/30/11
13.	Filing Fee (If required)	Amount _____ Check Date _____ Retaliatory <input type="checkbox"/> Yes <input type="checkbox"/> No Check Number _____
14.	Date of Domiciliary Approval	01/24/11
15.	Filing Description:	
	<p>Enclosed for your review and approval, please find the form referenced above. This insert page will revise the specification pages for contract form numbers P1426009NW, which was approved for use in your state on 02/27/09 under filing number 41645. This insert page has not been previously submitted to your Department for preliminary review. This submission does not contain any provisions, conditions, or concepts that are uncommon, unusual or possibly controversial from the standpoint of normal company or industry standards.</p> <p>The following changes have been made to the specification page of the annuity contract referenced above.</p> <ol style="list-style-type: none"> 1. Expanded the number of indexed strategies on page 3. 2. Removed the S&P disclosure and company contact information from page 3. 3. Changed the form number on page 3 to P1426011NW. 4. Added page 3-1 with the new S&P disclosure and the company contact information. 	

16.	Certification (If required)	
<p>I HEREBY CERTIFY that I have reviewed the applicable filing requirements for this filing, and the filing complies with all applicable statutory and regulatory provisions for the state of <u>Arkansas</u>.</p> <p>Print Name <u>Juli K. Fleming</u> Title <u>Compliance Filing Specialist</u></p> <p>Signature <u></u> Date <u>01/30/11</u></p>		

17.	Form Filing Attachment	
This filing transmittal is part of company tracking number		P1426011NW
This filing corresponds to rate filing company tracking number		

	Document Name	Form Number		Replaced Form Number
	Description			Previous State Filing Number
01	Individual Deferred Annuity Contract - Insert Pages	P1426011NW	<input checked="" type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other _____	
02			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other _____	
03			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other _____	
04			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other _____	
05			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other _____	
06			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other _____	
07			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other _____	
08			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other _____	
09			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other _____	
10			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other _____	
11			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other _____	

Annuity Investors[®]
LIFE INSURANCE COMPANY
Mailing Address: P.O. Box 5423, Cincinnati, OH 45201-5423

January 30, 2011

NAIC No. 084-93661
FEIN No. 31-1021738

Insurance Commissioner Jay Bradford
Compliance - Life and Health
Arkansas Department of Insurance
1200 West Third Street
Little Rock, AR 72201-1904

RE: Request For Approval - Annuity Investors Life Insurance Company
P1426011NW Individual Deferred Annuity Contract - Insert Pages

Dear Insurance Commissioner Bradford:

Enclosed for your review and approval, please find the form referenced above. This insert page will revise part of the specification pages for contract form numbers P1426009NW, which was approved for use in your state on 02/27/09 under filing number 41645. This insert page has not been previously submitted to your Department for preliminary review. This submission does not contain any provisions, conditions, or concepts that are uncommon, unusual or possibly controversial from the standpoint of normal company or industry standards.

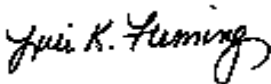
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4. Added page 3-1 with the new S&P disclosure and the company contact information.

With this information, I look forward to receiving a favorable response to this filing.

If you have any questions or require additional information regarding this submission, please feel free to contact me at either of the phone numbers indicated below or via e-mail at jfleming@gafri.com.

Sincerely,



Juli K. Fleming
Compliance Filing Specialist